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Applicant(s)

BOECKING, F.

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*EXAMINER INITIAL	REF	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
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		DOCUMENT NUMBER	DATE	COUNTRY	GI 466	SUBCLASS	Translation	
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amy		30 37 078 A	04/22/82	DE	FOIL	9/00		>
mb		196 50 900 A	06/10/98	DE	FO2M	51/06		V
m		198 49 203 A	04/27/00	DE	HO2N	11/00		1

OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, Etc.)

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